

CRS Insights

The Administration's Supplemental Request for Ebola and Other Infectious Diseases
Sarah A. Lister, Specialist in Public Health and Epidemiology (slister@crs.loc.gov, 7-7320)
November 7, 2014 (IN10176)

On November 5, 2014, the Administration submitted to Congress its [FY2015 "emergency appropriations" request](#) for \$6.18 billion "to prevent, prepare for, and respond to [the current Ebola outbreak] or other infectious diseases domestically and internationally." The [current continuing resolution \(CR\)](#), which runs through December 11, provided \$88 million to the Department of Health and Human Services (HHS) for the Ebola response. During September and October, the spread of Ebola virus disease ([EVD](#) in [West Africa](#)) worsened, and cases of EVD in the United States tested the readiness of the nation's public health and health care systems. [Senior appropriators have signaled](#) their intent to consider the Administration's request and the merits of additional funding for the Ebola response among their appropriations activities in the final weeks of the 113th Congress.

The Administration proposes that \$4.64 billion of the requested amount be provided for a number of specified "immediate needs," and the additional \$1.54 billion be provided as "contingency funding" for evolving needs, both domestically and internationally. Transfer authorities are requested for both immediate needs and contingency funds, including authority for transfer to other federal departments as long as funds are used for the broadly stated purposes of the request. Contingency funds would be provided to existing accounts at HHS and the State Department and made available for obligation only upon prior notice to Congress by the President. (As the request notes, in 2009 Congress provided contingency funding, along with immediate funding, in the [emergency supplemental for the response to the H1N1 influenza pandemic](#).) The Administration proposes that all requested funds be [designated as emergency requirements](#), and therefore not subject to budget caps.

Amounts requested by the Administration are presented in [Table 1](#). Funds are requested for domestic and international activities. Much of the funding would support ongoing activities—domestic outbreak control, international assistance, and development of vaccines and treatments—including:

- Establishing over 50 domestic Ebola Treatment Centers (ETCs). The Administration proposes waiving the prohibition on using HHS grants to renovate privately owned facilities. This would allow the HHS Secretary to improve selected hospitals to serve as designated treatment facilities for persons with EVD or other serious communicable diseases.
- Procurement of additional personal protective equipment (PPE) for the [Strategic National Stockpile](#).
- Increased support for [monitoring of travelers](#) at U.S. airports.
- [Advanced clinical trials](#) and [regulatory review](#) of experimental vaccines and treatments.
- Continued logistical support for Guinea, Liberia, Sierra Leone, and other countries to improve disease detection and control capacity.
- Reimbursement of State Department and U.S. Agency for International Development (USAID) accounts for funds previously expended on Ebola response.
- Estimated U.S. contributions to the new [United Nations Mission for Ebola Emergency Response](#) (UNMEER) and the [World Health Organization](#) (WHO).

Table 1. Administration's Emergency Appropriations Request for Ebola and Other Infectious Diseases

Amounts are U.S. dollars in millions.

Department/ Agency and/or Account	Amount	Purpose(s), (page of request)
HHS/CDC	1,830.0	Various domestic and international activities through CDC accounts. (pp. 1-2)

HHS/ASPR, PHSSEF	166.0	Domestic training, PPE, and creating more than 50 regional ETCs. (p. 3) ^a
HHS/ASPR, PHSSEF, BARDA	157.0	Manufacture of vaccines and treatments for clinical trials. (p. 3) ^a
HHS, PHSSEF	10.0	Modeling and genetic sequencing of Ebola virus. (p. 3) ^a
HHS/NIH, NIAID	238.0	Clinical trials on investigational vaccines and treatments. (p. 6)
HHS/FDA	25.0	Development, review, and regulation of vaccines and treatments. (p. 7)
USAID, Operating Expenses	19.0	Operating costs to address Ebola outbreak in West Africa. (p. 10)
USAID, Inspector General	5.6	Oversight of Ebola response in West Africa. (p. 11)
USAID, International Disaster Assistance	1,401.0	Disaster assistance to address humanitarian needs for West Africa. (p. 12)
USAID, Global Health Programs	340.0	Expanded USAID global health security activities to control infectious diseases and limit spread of Ebola. (p. 13)
State/USAID, Economic Support Fund	211.7	Training and program assistance to prevent economic and government instability during Ebola crisis, including reimbursement for earlier response. (p. 14)
State, Diplomatic, Consular Programs	35.4	Medical support and evacuation capacity, repatriation assistance, and other needs. (p. 16)
State, Repatriation Loans Program	1.0	Repatriation loans to U.S. citizens as necessary related to Ebola outbreak. (p. 17)
State, International Organizations and Programs	35.0	Estimated U.S. contributions to UNMEER. (p. 18)
State, International Organizations and Programs	50.3	Voluntary U.S. contributions to WHO and International Civil Aviation Organization for support to affected countries. (p. 19)
State, Nonproliferation, Anti-terrorism, Demining, and Related Programs	5.3	Biosafety and hazardous materials training in affected countries. (p. 20)
Defense/DARPA	112.0	Developing technologies, e.g., using antibodies from survivors, and shortening vaccine development time. (p. 21)
Subtotal, immediate needs	4,642.4	
HHS, contingency funds	751.0	For the HHS PHSSEF, "to prevent, prepare for, and respond to Ebola or other infectious disease domestically or internationally." (pp. 4-5)
State/USAID, contingency funds	792.0	For the USAID Economic Support Fund, emergency expenses for humanitarian, economic, stabilization aid. (pp 14-15)
Subtotal, contingency funds	1,543.0	
TOTAL	6,185.4	

Source: White House, Office of Management and Budget (OMB), "Estimate #4—FY 2015 Emergency Appropriations Request to Enhance the U.S. Government's Response to Ebola at Home and Abroad," November 5, 2014, http://www.whitehouse.gov/omb/budget_amendments.

Note: Amounts may not add due to rounding.

Acronyms: ASPR is HHS Assistant Secretary for Preparedness and Response; BARDA is HHS Biomedical Advanced Research and Development Authority; CDC is HHS Centers for Disease Control and Prevention; DARPA is Defense Advanced Research Projects Agency; FDA is HHS Food and Drug Administration; NIAID is NIH National Institute of Allergy and Infectious Diseases; NIH is HHS National Institutes of Health; PHSSEF is HHS Public Health and Social Services Emergency Fund; PPE is personal protective equipment.

a. This amount is part of \$333 million request on p. 3 of request document. The three funding amounts in the table are described in the letter from the OMB Director to the President, not in the request document itself.